

Wisconsin Department of Safety and Professional Services

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MARRIAGE AND FAMILY THERAPY, PROFESSIONAL COUNSELING, AND SOCIAL WORK EXAMINING BOARD PROFESSIONAL COUNSELOR CURRICULUM REQUIREMENTS

NAME: _____

Curriculum Requirements for Equivalent Graduate Programs

If you are applying for licensure, with a master's degree equivalency in Professional Counseling, you must have at least 42 semester hours or 63 quarter hours of academic credit in counseling related courses. These must include:

Subsection I:

- A least one course of at least three (3) semester hours or four (4) quarter hours academic credit in Counseling Theory
- At least three (3) semester hours or four (4) quarter hours academic credit in Supervised Counseling Practicum

Subsection II:

- At least three (3) semester hours or four (4) quarter hours academic credit in six (6) of the eight (8) content areas listed below

The remaining hours of academic credit must also be listed under the content areas into which they fit. To qualify, you must list at least 42 semester hours or 63 quarter hours total academic credit (See Section MPSW 14.01).

A course may not be used to fulfill more than one content area. You must attach college catalog course descriptions and request the school, which awarded your master's degree to submit an official graduate transcript.

If you are applying for licensure with a doctoral degree **equivalency**, you must have **48 semester hours or 72 quarter hours of academic credit** in counseling related courses. These must include a minimum of one course of at least three (3) semester hours or four (4) quarter hours academic credit in: Counseling Theory, Supervised Counseling Practicum, and in each of the other six (6) content areas. The remaining 18 semester hours or 32 quarter hours of academic credit must also be listed under the content areas into which they fit. **(See Section MPSW 14.01)**

A course may not be used to fulfill more than one content area. *You must attach college catalog course descriptions and request the school which awarded your master's or doctoral degree to submit an official graduate transcript.*

| I. | Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|----|---------------------------------|------|-------------|--------------|-------------|---|
| | Counseling Theory | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| | Supervised Counseling Practicum | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |

SIX OF THE FOLLOWING ARE REQUIRED FOR MASTER'S DEGREE EQUIVALENCY ALL EIGHT ARE REQUIRED FOR DOCTORAL DEGREE EQUIVALENCY

| II. | Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|-----|---------------------------------|------|-------------|--------------|-------------|---|
| | A. Human Growth and Development | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| | 1) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| | 2) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| | 3) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| | 4) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |

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| Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|---|------|-------------|--------------|-------------|---|
| B. Social and Cultural Foundations | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 1) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 2) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 3) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 4) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |

| Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|------------------------------------|------|-------------|--------------|-------------|---|
| C. The Helping Relationship | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 1) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 2) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 3) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 4) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |

| Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|---|------|-------------|--------------|-------------|---|
| D. Group Dynamics Process & Counseling | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 1) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 2) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 3) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 4) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |

| Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|--|------|-------------|--------------|-------------|---|
| E. Lifestyle & Career Development | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 1) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 2) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 3) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 4) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |

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| Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|------------------------------------|------|-------------|--------------|-------------|---|
| F. Appraisal of Individuals | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 1) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 2) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 3) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 4) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |

| Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|-----------------------------------|------|-------------|--------------|-------------|---|
| G. Research and Evaluation | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 1) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 2) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 3) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 4) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |

| Content Area | Date | Course Code | Course Title | Credit Hrs. | Office Use Only |
|---|------|-------------|--------------|---|---|
| H. Professional Counseling Orientation | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 1) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 2) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 3) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| 4) | | | | | <input type="checkbox"/> App <input type="checkbox"/> Deny |
| | | | | TOTAL # OF CREDITS FOR PARTS I AND II (This amount must equal at least 42 hours.) | |